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| <b>INFORMATION DISCLOSURE<br/>STATEMENT BY APPLICANT</b><br>( Not for submission under 37 CFR 1.99) | Application Number   |  |  |
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|   | First Named Inventor |  |  |
|   | Art Unit             |  |  |
|   | Examiner Name        |  |  |
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- ☐ Fee set forth in 37 CFR 1.17 (p) has been submitted herewith.
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A signature of the applicant or representative is required in accordance with CFR 1.33, 10.18. Please see CFR 1.4(d) for the form of the signature.

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